

PAGE	1	OF	1
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) RGA RIGHT DIRECTION PAC		FEC IDENTIFICATION NUMBER ▼ C C00490730	
Check if <input type="checkbox"/> 24-hour report	<input checked="" type="checkbox"/> 48-hour report	<input checked="" type="checkbox"/> New report	<input type="checkbox"/> Amends report filed on <input type="text" value="MM / DD / YYYY"/>

Full Name of Payee Red October Productions, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 1851A McGuckian St		Amount 8728.50	
City Annapolis	State MD	Zip Code 21401	Transaction ID : SE.4817
Purpose of Expenditure Advertising - Production	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
Calendar Year-To-Date Per Election for Office Sought 2953486.72		District: 00 State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

Full Name of Payee Target Enterprises LLC		Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 04 / 2016</div> </div>	
Mailing Address 15260 Ventura Blvd Suite 1240		Amount <div> <div></div> <div>279180.00</div> </div>	
City Sherman Oaks	State CA	Zip Code 91403	Transaction ID : SE.4813 Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y</div> <div>09 / 30 / 2016</div> </div>
Purpose of Expenditure Television Advertising - Media Placement		Category/ Type	<div> <div></div> <div>004</div> </div>
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <u>00</u> State: _____
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>2944758.22</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures.....	287908.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	287908.50

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adams, Michael, , ,

[Electronically Filed]

Date _____

Signature